

Student Name: _____

High School: _____

By signing this application, in addition to committing to be present at the monthly meetings, you are indicating that you will make yourself available for the internship from **July 11 - July 29. You are acknowledging that you cannot make other commitments between July 11 - July 29, including vacations, jobs, commitments to school activities such as Governor's School or college visits, etc.**

Student Signature

Date

Note to Parent/Guardian: By signing this application you give permission for your child to participate in the Fairfax County Youth Leadership Program including all out-of-school activities, many of which will take place after regular school hours. In addition, by signing this application, you understand that FCPS will not furnish transportation for off-site activities and individual students will need to provide their own transportation.

In addition, by signing this application you understand that your child will commit to their internship from July 11 - July 29 and other commitments will not be made during that time frame.

Parent/Guardian Signature

Date

Note to FCPS representatives: By signing this application you are indicating that this student is in good standing.

High School Counselor Signature

Date

Grade-level Administrator Signature

Date

APPLICATION DEADLINE – November 6, 2015

Please email this form to:

YLP@fairfaxcounty.gov

Please contact Martha Reed at

Martha.reed@fairfaxcounty.gov

with any questions